

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

623

Lobbyist's Registration Number

FOR OFFICE USE ONLY

Postmark Date: 1/26/01

REN
S 110
VIA ATM/B
WMI

1040008

1. NAME: Welch

Last

Linda

First

K

MF

2. BUSINESSPHONE: (225) 389-9429

Area Code and Phone Number

3. BUSINESS ADDRESS: 729 S. Academic Thruway, Baton Rouge, La. 70806

Street and No.

City

State

Zip

MAILING ADDRESS: SAME AS ABOVE

Street and No.

City

State

Zip

4. EMPLOYER: HealthCare Solutions, LLC

5. EMPLOYER'S ADDRESS: 729 S. Academic Thruway, Baton Rouge, La. 70806

Street and No.

City

State

Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name: Rural Hospital Coalition

Address: 729 S. Academic Thruway, Baton Rouge, La. 70806

Business or purpose: Association representing La's Small Rural Hospitals

Does this person pay you? Contracts with HealthCare Solutions

If No, who pays you? HealthCare Solutions, LLC

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2. Name La. Association of Rehabilitation Suppliers (LAARTS) Technology

Address 729 S. Acadian Thruway, B.R., La. 70806

Business or purpose Association representing customized wheelchair suppliers

Does this person pay you? Through contract with HealthCare Solutions, LLC

If No, who pays you? HealthCare Solutions, LLC

3. Name CARSA

Address 729 S. Acadian Thruway, Baton Rouge, La. 70806

Business or purpose Association representing providers of services for disabled persons

Does this person pay you? Through contract with HealthCare Solutions, LLC

If No, who pays you? HealthCare Solutions, LLC

4. Name PECAN GROVE TRAINING CENTER

Address P.O. Box 12957, Alexandria, La. 71315

Business or purpose Provides services to persons with developmental disabilities

Does this person pay you? Through contract with HealthCare Solutions, LLC

If No, who pays you? HealthCare Solutions, LLC

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act (LSA-R.S. 24:50 et seq.) has been deliberately omitted.

Linda K. Hellek
Signature of Lobbyist

